

#7

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: LORENZEN et al.

Attorney Docket No.: CCTYP001

Application No.: 09/594,213

Examiner: ZEENDER, Florian M.

Filed: June 14, 2000

Group: 3627

Title: MULTI-VENDOR INTERNET
COMMERCE SYSTEM FOR E-COMMERCE
APPLICATIONS AND METHODS THEREFOR

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail to: Box Non-Fee Amendment, Commissioner for Patents, Washington, D.C. 20231 on January 22, 2003.

Signed: Sue Funchess
Sue Funchess

*Drawing
Comments
Approved
FZ. 3/3/03*

**SEPARATE LETTER TO EXAMINER
REQUESTING APPROVAL OF DRAWING CHANGES**

Box Non-Fee Amendment
Commissioner for Patents
Washington, D.C. 20231

RECEIVED
JAN 29 2003
GROUP 3600

Dear Sir:

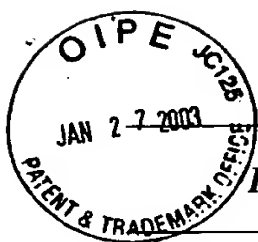
At the request of the Examiner in the Office Action dated October 30, 2002, Applicants hereby amend the margins of the original drawings as indicated in the enclosed photocopies. The approval of the Examiner is hereby requested. If there are any questions concerning this matter, please call the undersigned at the telephone number below.

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP

Michael Lee

Michael Lee
Registration No. 31,846

P.O. Box 778
Berkeley, CA 94704-0778
(831) 655-2300



GP #3627
PATENT

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In re application of: LORENZEN et al.

Attorney Docket No.: CCTYP001

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Signed: Sue Funchess
Sue Funchess

AMENDMENT A TRANSMITTAL

Commissioner for Patents
Washington, DC 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	20	MINUS	20	0	x 9 = \$-0-	x 18 =
Independent Claims	1	MINUS	3	0	x 42 = \$-0-	x 84 =
Multiple Dependent Claim Present and Fee Not Previously Paid					\$140.00	\$280.00
Total					\$-0-	\$

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0388 (Order No. CCTYP001).
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 50-0388 (Order No. CCTYP001).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP

Michael Lee

Michael Lee
Reg. No. 31,846

P.O. Box 778
Berkeley, CA 94704-0778